

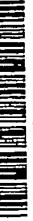
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Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. <input type="text"/> JONAS BROWNE
(Only for new nonprovisional applications under 37 CFR 1.63(b))		First Inventor <input type="text"/> JONAS BROWNE
		Title <input type="text"/> 2 TIER TOILET FLUSHING Sys
		Express Mail Label No. <input type="text"/>

22154 U.S. PTO
210/666698



22154 U.S. PTO
10/666698

091803

APPLICATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
See MPEP chapter 600 concerning utility patent application contents.		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit as original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages <input type="text"/> 7/7] (Preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the Invention - Brief Description of the Drawings (If filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		9. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <input type="text"/> 1]		10. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper
5. Oath or Declaration [Total Pages <input type="text"/> 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed)		11. <input type="checkbox"/> Statements verifying identity of above copies
12. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		13. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 14. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney
		15. <input type="checkbox"/> English Translation Document (if applicable) 16. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS 17. <input type="checkbox"/> Preliminary Amendment 18. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 19. <input type="checkbox"/> Certified Copy of Priority Document(s) (If foreign priority is claimed) 20. <input type="checkbox"/> Other: _____

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No. _____

Prior application Information: Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> (Insert Customer No. or Attach bar code label, here)		or <input checked="" type="checkbox"/> Correspondence address below
Name	Flush Laboratories, Inc		
	221 East Hartsdale Avenue		
Address			
City	Hartsdale	State	NY
Country	USA	Telephone	914-472-0120
Fax	472-0589		

Name (Print/Type)	Jonas Browne	Registration No. (Attorney/Agent)
Signature	Jonas Browne	
		Date March 5, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

original

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FEE TRANSMITTAL

for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)375.00

Complete If Known

Application Number	
Filing Date	
First Named Inventor	<u>JONAS BROWNE</u>
Examiner Name	
Art Unit	<u>2 TIER TOILET FLUSHING Sys</u>
Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	65	Surcharge - late filing fee or cash	
1052 50	2052 25	25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	130	Non-English specification	
1812 2,520	1812 2,520	2,520	For filing a request for ex parte reexamination	
1804 920	1804 920	920	Requesting publication of SIR prior to Examiner action	
1805 1,840	1805 1,840	1,840	Requesting publication of SIR after Examiner action	
1251 110	2251 55	55	Extension for reply within first month	
1252 410	2252 205	205	Extension for reply within second month	
1253 930	2253 465	465	Extension for reply within third month	
1254 1,450	2254 725	725	Extension for reply within fourth month	
1255 1,970	2255 985	985	Extension for reply within fifth month	
1401 320	2401 160	160	Notice of Appeal	
1402 320	2402 160	160	Filing a brief in support of an appeal	
1403 280	2403 140	140	Request for oral hearing	
1451 1,510	1451 1,510	1,510	Petition to institute a public use proceeding	
1452 110	2452 55	55	Petition to revive - unavoidable	
1453 1,300	2453 650	650	Petition to revive - unintentional	
1501 1,300	2501 650	650	Utility issue fee (or reissue)	
1502 470	2502 235	235	Design issue fee	
1503 630	2503 315	315	Plant issue fee	
1460 130	1460 130	130	Petitions to the Commissioner	
1807 50	1807 50	50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	180	Submission of Information Disclosure Stmt	
8021 40	8021 40	40	Recording each patent assignment per property (times number of properties)	
1809 750	2809 375	375	Filing a submission after final rejection (37 CFR 1.129(n))	
1810 750	2810 375	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801 750	2801 375	375	Request for Continued Examination (RCE)	
1802 900	1802 900	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

**or number previously paid, if greater; For Reissues, see above

(Complete if applicable)

SUBMITTED BY			
Name (Print/Type)	<u>JONAS BROWNE</u>	Registration No.	
Signature	<u>Jonas Browne</u>	(Attorney/Agent)	Telephone <u>914-472-0120</u>
		Date	<u>3-5-03</u>

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.

United States Senate

WASHINGTON, DC 20510

July 25, 2003

Mr. Josh Browne, President
Flush Laboratories, Inc.
221 East Hartsdale Ave.
Hartsdale, N.Y. 10530

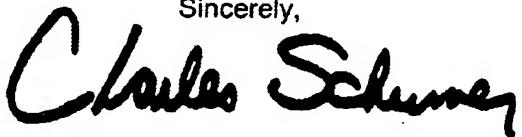
Dear Mr. Browne:

Thank you for contacting my office and asking for help regarding your patent application.

In an effort to be of assistance, I have brought your problem to the attention of the appropriate officials. I have requested a review of this matter and a written response.

As soon as I have something further to report, I will contact you again.

Sincerely,



U.S. Senator

PLEASE RESPOND TO THE FOLLOWING OFFICE:

<input type="checkbox"/> ALBANY: Loy O'Brien Building ROOM 420 ALBANY, NY 12207 (518) 431-4070	<input type="checkbox"/> BINGHAMTON: FEDERAL OFFICE BUILDING 15 HENRY STREET ROOM 86 BINGHAMTON, NY 13901 (607) 772-8109	<input type="checkbox"/> BUFFALO: 111 WEST BROAD ROOM 620 BUFFALO, NY 14202 (716) 845-4111	<input type="checkbox"/> HUDSON VALLEY: P.O. Box A RED HOOK, NY 12571 (914) 285-9741 (845) 569-0923	<input type="checkbox"/> LONG ISLAND: Two Gateway Plaza RED HOOK, NY 12571 (914) 285-9741 (716) 845-4111 MELVILLE, NY 11747 (516) 753-0978	<input type="checkbox"/> NEW YORK CITY: 145 PINE LAWN ROAD ROOM 300N NEW YORK, NY 10017 (212) 486-6430 TDD: (212) 486-7661	<input type="checkbox"/> ROCHESTER: 257 JERICHO AVENUE SUITE 1702 NEW YORK, NY 10017 (212) 486-6430 ROCHESTER, NY 14614 (716) 263-5866	<input type="checkbox"/> SYRACUSE: 100 STATE STREET ROOM 841 SYRACUSE, NY 13261 (315) 423-5471	<input type="checkbox"/> WASHINGTON: 313 UNITED STATES SENATE 100 STATE STREET WASHINGTON, DC 20510 (202) 224-6542 TDD: (202) 224-0420
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flush laboratories, inc.
221 East Hartsdale Avenue
Hartsdale, NY 10530
914-472-0120, fax 914-472-0589

September 17, 2003

*Director of U.S. Patent Office
Mail Stop Petitions
P.O. Box 1450
Alexandria, VA 22313-1450*

Dear sir.

Included is an exact copy of my original patent application. Your name and address was given to me by Ms Dianne Olksa of the Patent Office after a short telephone correspondence about my lost original patent documents. She prompted me to send these documents on to you.

I am stopping the original check and including herein a new check for the amount of \$375.00.

Also included is a copy of the original Certified Mail Receipt if that will be of use to you.

Thank you for your immediate attention.

Yours, sincerely,


Jonas (Josh) Browne